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WILLIAM GILL

Observations on the Medical  
Appointments of Charitable  
Institutions; with remarks  
on the system of professional  
education.

Liverpool 1825.



OBSERVATIONS  
ON THE  
MEDICAL APPOINTMENTS  
OF  
*CHARITABLE INSTITUTIONS;*  
WITH  
REMARKS ON THE SYSTEM  
OF  
PROFESSIONAL EDUCATION.

BY WILLIAM GILL,  
Surgeon.



LIVERPOOL:

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1825.

ERRATA.

Page 8 line 2, for "*he*," read "*on him*."

20 line 4, for "*body*," read "*being*."

20 line 15 from the bottom, for "*care*," read "*their care*."



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## OBSERVATIONS,

&c. &c.

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WHEN I ventured, on a former occasion, to offer my opinion to the public, as to the principles that, it seemed to me, should regulate the appointment of medical officers to hospitals, I was sensible it might be supposed, that I was solely actuated by the desire of furthering my individual views. Hence, it is not improbable, that some, in forming this opinion, have condemned or neglected that reasoning which, if thoroughly examined, would have convinced.

I am well aware, that a man's parental fondness for a favoured idea casts its every weakness and imperfection into the shade: still, subsequent consideration serves but to strengthen my opinion, that the adoption of a definite period for the holding of public appointments, would afford opportunity to a greater proportion of the profession of acquiring solid and useful practical data for their guidance, and, consequently, that the public would derive a greater ratio of advantage from their services.

It has been briefly remarked, that patients would be injured by such changes: the proof thereof was not offered. I would fain know on what principle it is urged, that the retiring of a medical attendant, every four or five years, can militate against their welfare.

But, in supposing that such a danger existed, would not the election of assistants to the medical officers effectually ward it

off? What better plan could be devised to prevent it? What are the arguments that can or may be adduced against the attaching of assistants to our institutions? Are not the same objects to be attained here as elsewhere? Is the instruction of the rising generation, in so important an art as that of restoring human beings to health, of little moment?

To the man who contents himself with the reflection, that, when assailed by accident or disease, he can command the best professional advice, it is in vain to offer argument: he will rest satisfied. To him, however, who feels assured that an increase to professional knowledge in the aggregate is highly desirable, every proposition that holds out the prospect of realizing such an acquisition will claim a serious and unbiassed examination.

In again laying before you the ground-work on which I build the arguments for innovation, I would have you to be influenced solely by their weight, and the remembrance, that "Utility alone should be the incitement to every change."

I believe I have deduced them from a just estimate of the motives that prompt men to exertion. If these powerful impulses have hitherto been too much narrowed in their range of action, have produced but partial effects, is it not well worth the consideration of reflecting men, whether the sphere of their influence shall or shall not be extended?

As the guardians of public institutions, I should imagine the trustees to be fully warranted to make those enactments with respect to the appointment of medical officers, and their continuance in office, which appear to them best adapted to the welfare of the patients and the general interests of the profession.\*

\* I am aware, that a body of individuals, however well informed, should never attempt to regulate the professional details of the institution over which they preside. The Continental Hospitals, the Medical Navy and Army Boards of England, are governed by professional chiefs, who are totally independent of those over whom they have control. Such appointments in civil life, besides their total incompatibility with the spirit of our institutions, could not be created; no adequate remuneration could be afforded to any man to undertake the office. It is clearly defined general principles, then, that must be held in view and acted upon.



Under the present system, a few individuals only are employed. The advantages they derive from hospital practice can only be proportionately experienced by the public. By affording to an increased number a participancy in these appointments, will not a greater ratio of good be diffused through the community? \*

If the above position be correct, it merits, then, consideration whether or not a modification can be accomplished, having special care that the more immediate objects of the institution be not compromised.

I hope that the observations I shall make will excite an increased interest among reflecting men with regard to the medical art; for they must be fully convinced, that an increase of skill, diffused through a larger proportion of its professors, must mainly contribute to the physical and moral happiness of their townsmen.

As public institutions afford the greatest facilities for acquiring professional knowledge, I wish those who support them to be thoroughly aware of the fact, should they not have previously regarded them in this point of view; and, considering them as the sources whence almost all the great practical improvements have emanated, devise the means of intrusting the performance of the professional duties to as great a proportion as possible of the eligible practitioners.

I well know the difficulty of the subject, the leading points of which I have collected for your consideration. I know, too, that our instinctive attachment to the arrangements of our forefathers, mingled with respect for their ashes, has served as a strong hold and masquing-place for even the greatest absurdities. It is in the general concerns of men as in the medical profession. Few of us are capable, even after a long practice, of examining objects with other eyes than those of the school in which we were educated. Minds even of superior stamp,

\* To augment the number of good artists, it is necessary to enlarge the field of their hopes, and afford opportunities for the exertion of their talents.

capable of judging for themselves, the moment they enter the career of observation, often neglect to examine and search into the merits of their first professional impressions.\*

It will surely be assented to by all, that the more plentifully a community is supplied with skilful medical persons the more it will be advantaged, and that infirmaries and public medical institutions are best adapted to form them.

That this view of the importance of hospitals is correct, I think can scarcely be doubted. I quote Dr. Grattan in confirmation. He says, in the second part of his *Remarks on the Importance of the Medical Profession*: "To those, however, who are capable of reflection I would observe, that the profession of medicine now differs essentially from what it was thirty years ago. Formerly, physicians, by slow degrees, acquired the experience necessary to render them not merely good, but safe practitioners. Hospitals and dispensaries were then almost unknown, so that the experience of the physician increased only as his private practice extended. But this is not now the case: since the establishment of hospitals matters have, in this respect, undergone a great revolution. Hospitals and dispensaries are now so numerous, that almost every physician can procure an appointment to one, and they are principally attended by those who, of all others, are the best qualified to profit by the extensive opportunities which they afford for the improvement of medicine. In fact, to the introduction of hospitals, civil and military, I believe it will be found that almost all the improvements are to be ascribed which have, of late years, been made in the practice of medicine. In consequence of these establishments a new class of practitioners have been formed, the individuals of which attain to a complete knowledge of their

\* In reorganizing the French hospitals, it required great efforts of the pen, nay, even influence, to abolish the practice of putting two, and even four patients in the same bed. At Lyons, in 1819, I was surprised to see that this method was not, even then, abandoned, though, I believe, it was only adopted among a small number of the convalescents.

“ profession, almost before the physicians of former times could  
“ be said to have finished their studies.”

If the results from the establishment of hospitals be thus important, is it not clear, then, that their trustees would alike benefit science and the public, by affording opportunity to as great a proportion of the medical men as is consistent with the welfare of the patients, of sharing in the professional duties, and as well by the appointment of an assistant, selected from the juniors, one to be attached to each physician and surgeon ?

Are you desirous of forming as great a number as possible of good practitioners ? No plan, I believe, can more readily accomplish the object. Surely seven or ten years employed in performing well the duties of a public institution must be fully adequate thereto.

Above all, by the adoption of these changes, you would call into play a spirit of emulation. The eligible practitioner would be induced to keep himself more fully prepared for the performance of the duties of the office he may one day hold ; and the youth would be incited to pursue his preliminary studies with increased zeal, for an hospital is the arena where a medical man is frequently obliged to exert the utmost energy of his nature. The physician has to contend with disease in its most concentrated form, the surgeon to struggle with the most frightful casualties.

The author of the *Essay on Medical Economy* observes,  
“ The assistant surgeons to our great hospitals and the  
“ assistant physicians to dispensaries become generally distinguished in their respective departments by imbibing the  
“ opinions of their patrons, and from them acquiring masterly  
“ habits of operating or prescribing. The emulation, too, excited among a number of young men associated in this way,  
“ and looking forward to a contest for the honours held by  
“ their chiefs, is a source of incalculable improvement.”

I think you will perceive, at a first glance, the advantages that must accrue from the attaching assistants to the medical officers. In the event of their sickness or unavoidable absence,

on whom can so properly devolve the care of their patients as he who had witnessed the treatment and was acquainted with their views of the disease?

In nominating a man as assistant, and, subsequently, as chief, is he zealous and instructed? you have given him ample time, in the space of eight or ten years, to render himself master of his profession: is he the contrary? you will not have him for life.

It has been observed, that the Infirmary, and, of course, all other public institutions, are not professional schools. Why, then, are appointments to them so earnestly desired? Is he who analyzes the motives of human actions to be told that we seek them solely for the delight of doing good? Can such an assertion be borne out by analogies derived from the varied walks of life?

I advised you, on a former occasion, to seek information of the young man who has just returned from the schools and commenced practice. Ask him whether or not he will derive advantage from such an arrangement. Is it not thus he will be efficiently enabled to turn his preliminary studies to a good account? You will have afforded him the opportunity of benefiting by the counsel of his senior, of witnessing his practice, and, what is more than all, of perfecting himself at the bed side. What he has been taught at the schools will then be sanctioned by observation, or discarded as erroneous. You will open to him the book of nature, ere he has forgotten the characters of the language: on his own head will rest the blame, if he do not become a good practitioner. Estimate what the comparative acquisitions must be, generally speaking, of two young men of equal industry and capacity; the one having acted as assistant at an hospital, witnessed the practice and treasured up the deductions of an experienced elder, then having succeeded him; the other having been confined to the limited circle of a private practice.

In the medical profession, application should not cease when a youth has quitted the schools: he is then about to enter the grand theatre of observation. Reflect, however, whether,



generally speaking, they have sufficient motives for industry and exertion. Are there opportunities enough held out to them for the acquisition of distinction, for exciting that ardour of pursuit and uniformity of application which lead, in the common course of events, to eminence and excellence? It is for you to consider whether or not the evil can, in some degree, be remedied by the adoption of a judicious change in the hospital system.

I should say, if the spirit of inquiry can be kept in action, and the ore of learning in polish, during the first ten years of active life, they may safely afterwards be left to the love of fame, the desire of being useful, and the force of habit. Do you need a precedent for the establishment of assistants? Look round the metropolitan institutions and the continental schools. Sir Astley Cooper and Mr. Abernethy were both assistant surgeons for a considerable period of their lives.

Are your principal surgeons or physicians engaged in an extended private practice? Would not the adoption of assistants be advantageous to the patients? In the treatment of disease, in the care of casualties, a number of minor attentions are necessary to ensure a prompt and decided success. To whom, then, can the performance of these be more properly left than to qualified assistants; to those who are personally interested in the reputation of the hospital? Will not the trust they hold and the prospect of advancement be powerful motives for exertion? Will not the desire of improvement ensure their attention? \*

An appeal to facts will verify my conclusion as to the utility of assistants. Is it not by this plan alone that young men acquire the rudiments of their art in the metropolitan hospitals?

\* If a medical man have attained reputation and extended practice by the nomination to an hospital, is it (generally speaking) probable that he will continue to perform his public duties with his early assiduity? The objects that prompted him to seek the office have been attained; and even if ever so desirous, he can with difficulty spare the time that he knows to be necessary for his duty. If such ever be the fact, why should not an assistant be trained up under his auspices, and eventually replace him?

They pay a large annual sum for the dressership and office of house surgeon. The management of diseases and accidents is intrusted to them. The physicians and surgeons visit at stated periods. When there is any thing of moment they are summoned. The dressers are *bonâ fide* assistants for the time. It is well known, that the circumstance of a man having been a dresser to a celebrated surgeon, or house surgeon to a good hospital, stamps a value on his subsequent professional reputation, not granted to one who has simply paid his fee for the right of entering its walls.

If, then, this plan alone can effectually initiate youths at the metropolis into the practical knowledge of their art, why should it not be pursued when they return to their native towns and commence business? Common sense has pointed it out to the metropolitan practitioners as the readiest means of instructing the student. It cannot be disadvantageous to the patient, provided a proper inquiry has been previously made as to the capability of the applicant for the office.

If ever there were a subject that merited profound research, that should still the voice of party feeling, and paralyze the sinews of influence, I take this to be that one. To increase the professional knowledge of a greater proportion of your medical men is surely of moment.

I would have you to consider professional excellence not merely as an object of private ambition, calculated to gratify individual interest or vanity, but as intimately connected with the general interests of society. If the medical art ward off the attacks of disease, and restore lost health by its precepts, should not every means be resorted to to advance it in excellence? If, by the aid of a judicious arrangement as to the public appointments, you can afford opportunity, now wanting, to a double or treble proportion of practitioners of attaining knowledge, will you not have largely contributed to the sum of human happiness?

Perhaps it might be well to consider whether the assertion be really a fact, that there are a number of practitioners, in the

aggregate body, who are only partially equivalent, or, in other words, incompetent to the whole range of their professional duties. Next, if so, whence the causes of this incompetency? Are they comprised under the following heads?

1. Defective education, preliminary and professional; a consequence, frequently, of the *res angusta domi*.

2. The crowd of pupils at the metropolitan hospitals; so that, unless a student be a dresser, or happen to be near the surgeon on his visit, he can neither see nor hear what is going forward.\*

3. Want of industry or intellect in the individual.

4. The shortness of time spent in professional education.

5. The defective nature of the examination at the London College.†

\* It would not be an unuseful inquiry to ascertain what proportion of the numerous pupils, who enter at some of the metropolitan hospitals, may be able to catch even a glimpse of each patient on the days on which the surgeons attend. When a hundred or more students are crowding round the bed of a patient, there is little within the observation of those who are behind their companions. The time allotted for the consideration of each patient's case, during these rounds, is, perhaps, too delicate a subject to admit of public discussion.

† The thorough inadequacy of verbal examination to determine the qualifications in a practical art must be obvious to every one who knows what surgery is, and who reflects that to describe is one thing, to be able to perform, another. It might form a subject of inquiry, whether or not the examiners of a candidate for a surgical diploma should or should not see him actually perform the principal operations on the dead body. In large towns the practitioner, who hesitates, may always resort to another; but, in remote districts, this resource may be denied. I say might, because, under the circumstances in which these examinations are conducted, perhaps real, but timid talent, would often be eclipsed by mediocrity, which is generally presumptuous. Those who have to ascertain the capability of candidates for the practice of an important art, should surely seek modes by which presence of mind and facility of utterance should not alone be paramount. The difficulty, however, of procuring dead bodies is so great, and the expense so serious, that the College of Surgeons not only dispense with seeing the candidate operate themselves, but do not even require certificates that he has actually done so under the eye of his anatomical or surgical teacher.

6. The difficulty of the art itself; and,

Lastly. The want of opportunity for effecting subsequent progressive improvement, though the individual shall possess both industry and inclination.

That the first question is a fact cannot be doubted; indeed, it has never been denied. The medical writings of all ages detail instances of mismanagement. Sir Astley Cooper commences his work on the Dislocation, &c. of Bones with the anecdote of a patient whose leg had been mismanaged by his surgeon, and who, whenever they met, used to jeer him with the salutation of "O, Sir, you are a good apothecary, but no "surgeon."

Mr. Alcock, of London, who has kindly favoured me with the letter, of which a copy is attached to this pamphlet, has lately published, in the first volume of the Transactions of the Associated Apothecaries of England and Wales, an Essay on the Education and Duties of the general Practitioner in Medicine and Surgery. It merits the attentive perusal of every parent or guardian, previously to placing a youth as apprentice to an institution or individual. It would enable them to form a judgment with regard to the desired extent of his previous acquirements, would render them circumspect in the choice of the person to be selected for a master, and inform them of the nature and length of the subsequent studies ere he ought to commence practice.

It appears to me, however, that many parents who place their children to the profession, as a means of gaining their livelihood, have not pecuniary resources ample enough to enable them to pursue such a plan of study. These must content themselves, then, with the period prescribed by the law of the college, and, having received their diploma, commence practice.

If it may be safely assumed, that the preliminary education of many ever has been, and perhaps ever will be, defective, it becomes a question for the consideration of him who interests



himself in this department of the social economy, whether or not means can be resorted to of remedying the evil.

Though the preliminary education be as perfect as possible, still it is by the observation of actual disease, and reasoning thereon, that the good and efficient practitioner must be formed.

It is by slow degrees the mind arrives at that maturity of manhood so requisite for the well practising of our art. We must have personally encountered its difficulties at the bed of sickness, ere we shall be able to appreciate fully the extent of responsibility that is attached to us. It is after we have felt that the life of another hangs, perhaps, on our decision, and that our own welfare is at stake, that we seriously commence that research which enables us to store up a series of facts (and the best of all must be those that are drawn from our own experience) calculated to aid us in pressing emergencies.

If there be of those who thirst after knowledge, who are actuated by the sacred desire of rendering themselves equivalent to the duties of their calling, and who are sensible that they have not had the means of pursuing that system of early education they wished ; is it well, then, that the doors of your hospitals should be closed? Had they an opportunity of witnessing the instructive cases therein ; of accompanying the visits of your medical attendants ; of hearing their professional observations and of commenting on their opinions, would not the means be afforded them of ascending in the scale of professional excellence?

As guardians of public institutions, I would urge you, then, to bear in mind the important advantages you can confer upon the medical public by

The adoption of periodical changes of your medical officers ;

The appointment of an assistant to each ; and

By requiring that clinical discourses be given twice or thrice in the week.\*

\* The keeping correct records of diseases and casualties, of which the interesting ones might be published annually, would be useful. Would they not require a series of useful labours? Though they might not

It will be urged, perhaps, that all this is foreign to the purposes for which charitable institutions were formed. I answer, that it will afford one of the most effective means of supplying the deficiencies of early education.

You will establish a provincial school in nowise inferior to those of the metropolis. Your physicians and surgeons are fully competent to describe and comment on the facts they witness. Why, then, neglect such a means of diffusing professional knowledge? Shall such an obvious and easy method of imparting instruction in an art like ours be neglected, and the zeal of the philanthropist be confined to the education of children and artisans only?

This giving of clinical discourses will much benefit those within your walls. I quoted, on a former occasion, the impressive words of Dr. John Thomson; it will be well to repeat them.

“ But, if clinical lectures be, in an eminent degree, useful to students, it is not less certain they would indirectly benefit the patients. If there be any thing which can induce the rash practitioner to pause, the inconsiderate to reflect, or the ill-informed to seek for instruction, it is the necessity of explaining the grounds of his practice and his opinions of disease, to an audience composed of his professional brethren.”

Yourselves are interested in developing the powers of your professional attendants to the utmost. In the hour of pain and danger you will derive advantage therefrom.

render any important services to the art, they would to the compilers; and the diseases of those patients under their care would be better understood. The true fount whence knowledge is derived is observation. All the natural sciences are rich in proportion to the number of well-attested facts. Mr. Alcock observes, to render medical lectures fully efficient, there is yet one great desideratum wanting in London: an hospital conducted with strict reference to the teaching of the science of medicine and surgery. The first modern clinical schools, I believe, were established at Vienna and Edinburgh. The philosophy and zeal of Joseph II rendered, for a length of time, the former school superior to every thing that could be imagined. Those in France were finally established in 1795.

The fact is incontrovertible, that the qualifications of many who undertake the practice of the medical art are defective.

Professional men have long been aware of the evil. A few years ago, a bill, for bettering the art of surgery, &c., was submitted by the College of Surgeons to the House of Commons. It was thrown out.

Did it appear to the dissentient members, that this body had more in view the aggrandizement of their own interests than the public welfare, and that the art would be best nurtured by the discernment of the public alone?

In attaining an elementary knowledge of an art either manual or intellectual, it is clear that the learner will be much facilitated by good and diligent instruction.

What quantum of instruction do the bulk of youths receive during their apprenticeship or pupilage?

Should their parents be enabled to apprentice them to an hospital surgeon, or to an institution, they will, if attentive, acquire, without the aid even of their seniors, a valuable fund of information, the opportunities afforded them for its acquisition being numerous. It is only a few, however, that can be placed in these situations; the bulk must be apprenticed to private practitioners.

Mr. Aleoek has well and eloquently depicted the duties of the master towards the pupil. Were they all instructed in the mode he has described, and their minds thus early stored with useful information, many might subsequently attain a degree of perfection, who otherwise would scarcely have reached mediocrity; for, as he well observes, "it requires but a very limited knowledge of the biography of eminent men, to be able to trace, in many instances, the foundation of their future greatness to circumstances, sometimes accidental, at others prepared for them in early life, so as to call forth so much zeal, perseverance, and ambition, that all difficulties which were in their nature surmountable, were generally surmounted; whilst every success obtained, improved these qualifications and added confidence in all subsequent undertakings."

I fear that few of us have thought so deeply of the duties attached to the office of a master; and that the interest necessary to incite us to undertake the mode of instruction pointed out, will only be felt, generally speaking, by a parent or relative. I would not wish to hold in too low estimate the benevolence of men; but still, I am inclined to believe, that the majority of practitioners will content themselves with a far inferior degree of exertion. If I am correct in this opinion, the education of those who are placed under private practitioners must frequently be defective. It is likely to remain so; for what counterpoise can there be to individual neglect, but individual sense of duty? In public institutions the thing is reversed, their supporters have only clearly to understand, that important instruction can be imparted by those who hold the professional functions; that the very task will benefit him who instructs, and that the poor, the professional public, and the community, will be alike advantaged.

It is probable, your stipulating for the giving of clinical lectures will experience opposition. The idea of not being remunerated for public professional duties, will ever strike the eye of him who examines superficially; why, he will exclaim, add to the burden already borne? If what an experienced and learned physician of the metropolis writes me be correct, that the generality of men appointed to the duties of hospitals seek them from motives of private interest, and that the public is made the stepping-stone to reputation and emolument, will not the managers of hospitals be ever enabled to find of those who will gladly accept the nominations on these terms, as they must be well aware, that the very circumstance of being able to give useful practical discourses must ever add to their honour and profit?

The Court of Examiners of the College of Surgeons have decreed, that the certificates of seven hospitals in London, two in Dublin, that of Edinburgh and Glasgow, only shall be received as valid, when a student presents himself for a diploma. The anatomical lectures, those in surgery and practical dissection, must have been attended at the same places.



Have the general interests of the profession been consulted by such an arrangement? Should not the Court of Examiners simply content themselves with ascertaining whether a candidate is or is not possessed of the knowledge of the art he claims a license to practice? Why decide that eleven hospitals only are to grant certificates, and that the surgeons, of all others, though capable of practising, are not of teaching their art? Can *the where* the requisite qualifications for a diploma have been obtained be an object of real importance?

Surely it would be a better arrangement, if the fee for examination were trebled or quadrupled, and the fitness of the aspirant only regarded.

Is it well done thus to dry up the sources of any emolument the provincial hospital surgeon might derive from instructing his pupils and brethren? Surrounded by diseases and accidents, equally as important as those to be found in the hospitals named, he could surely teach his art.

A youth who has been apprenticed to our Infirmary may have rendered himself fully equivalent to undergo examination, and yet he is excluded till he shall have paid the fees of one of the London or other hospitals; while another, without any further knowledge of hospital practice than the smattering obtained by walking one of the privileged institutions, shall be considered amply qualified for examination; and, however incapable he may be in the actual practice of surgery, yet, examined for the express purpose, shall pass his verbal examination with credit, and obtain a diploma.

It might be of utility to institute a comparison between the system of education adopted by us and the continental states. With them the instruction given is adapted to every grade of intellect. The pupil is progressively advanced from the elementary classes to those formed for the completion of his studies. The examinations for the office of internal pupil to the hospitals are made in every way: verbally, a certain time only being allowed for the reply; in writing, to which written answers are

given; and from actual proof of their knowledge of anatomy on the dead body. The contest between the older surgeons for hospital and academic appointments are conducted in a similar way. Some of the French, however, regard all this as the different acts of a well-performed drama; they assert that the successful candidate has always been previously determined on. Be that as it may, the very performance is useful.

Whence comes it, that, among our neighbours, a severe examination, demanding verbal and written answers, and actual proof of possessing anatomical knowledge on the dead body, is required ere a youth can be admitted as internal pupil to one of their hospitals only, where his actual responsibility stands as at Zero, compared with that of the dressers and house surgeons of ours? The surgeons, as well, give practical proofs of their equivalence for the office they desire.

What is required to introduce a pupil readily to the knowledge of the principles of his art?

If a youth be an apprentice in this town, for example, he has now an opportunity of acquiring a knowledge of anatomy quite sufficient for every practical purpose. A few years back this advantage did not exist: I mention anatomy, for without it every attempt at explanation would be imperfectly comprehended. Some knowledge of descriptive anatomy and the properties of the various parts must be acquired, ere the explanation of the phenomena of disease can be well understood.

A pupil and a surgeon both examine a fractured leg. The former knows, perhaps, but little of the matter, save that the bone is broken, and that when a few weeks shall have elapsed it will unite, provided the ends of the bone be placed together and the powers of the constitution be equivalent to the process. In the mind of the surgeon what a crowd of perceptions are excited! the nature of the fracture; the state of the surrounding parts; the effects of position; of muscular action; the state of the general health; the action of surrounding physical agents; of the moral affections; the possibility of some mechanical

cause preventing union ; the process of nature for accomplishing it ; the comparative value of the different aids adopted by art, and the inductions he has drawn from past experience.

Were these different topics explained and descanted on, the pupil's mind would readily be stored with a fund of useful practical knowledge. His attention would be directed towards the acquisition of the important data of his profession. From the commencement of his career, he would be enabled to store up a variety of precepts, which would one day serve as a guide to his future practice.

If to this plan were superadded frequent interrogations and the keeping of a journal, the outline would probably be complete. It is by such methods the seniors would be enabled to judge of the degree of their respective acquirements. He who received praise would feel the delight resulting from a sense of superiority, and the indolent would be roused to exertion.

Books and lectures can do but little for us. They cast an obscure light on the labyrinths we have to explore. They simply impress on the memory what are the legitimate objects of inquiry. They are the maps of the territory over which we have to travel ; to understand the country, we must examine it with our own eyes.

The adoption of clinical instruction is a step nearer to, and an important one, the advantages of actual practice. What can so clearly imprint upon the mind of the novice the character of a disease, a knowledge, as far as it is to be attained, of the operations of nature ? He has just beheld the patient, heard the answers given to the interrogatories ; the impressions are still vivid in his recollection. He is now an auditor of the views the practitioner entertains of it, and the explanation of the symptoms, &c. of the object sought for by the administration and nature of the remedies. Has he formed an erroneous opinion of what he has seen ? it will be at once dissipated. Does the patient die, and is the body examined ? the changes are pointed out to him that the various organs have undergone.

Would not the adoption of such a system diffuse a spirit of research and emulation throughout the various classes of the profession? Could ~~they~~<sup>they</sup> look with indifference on that wonderful structure, a human body, in which, from the first cry uttered by the infant, in youth, maturity, and declining age, a series of beautiful and interesting phenomena are developed in health and disease? If you increase the number of observers, will you not afford a better chance that some of the mysteries of nature may be one day unveiled that have hitherto eluded research? On a former occasion I have mentioned, that it would be well if youth, who were qualified, were allowed to operate occasionally, under the superintendence of their seniors. It will be seen, in Mr. Alcock's letter, that he considers such a proposition, if carried into effect, might sometimes be productive of mischief. I did not expect, however, to find the idea realized, and that by so celebrated a surgeon as the Professor Delpech, of Montpellier. In the avant-propos to his Clinical Surgery, he says, "I formed, of the pupils that were "in attendance on the clinical wards, a corps of observers. "The seniors and best informed of them were appointed directors. The patients were distributed and placed under <sup>their</sup> care, so that their attention might be concentrated on a small "number of objects. I left to them the ascertaining of "the disease and the selection of the appropriate remedies. "Sometimes I placed the knife in their hands, in order that "they might operate in public on the living body. This was "done either after previous notice, so as to afford them time "for reflection, or unawares, that I might ascertain the extent of "their resources."

The sole object of too many of the pupils of the present day is to store the memory with words. What inducement have they to bring into play the other intellectual faculties? The passing a verbal examination is the grand desideratum. They have merely, then, to attach a certain chain of recollections to a given word, and, if gifted with a retentive memory, they will reply satisfactorily to every query.



The keeping of journals and the interrogatory system is employed in the French and Austrian hospitals. The pupils keep records of the cases they superintend under the physician and surgeon, and one day in the week is chosen by the latter for their inspection.

Every one will readily perceive the advantages that must result from such a method, both to the senior and junior. It is the application of the system of mutual instruction, and in the most important department of human knowledge; for as you render a medical person instructed, and fully capable of performing the duties of his calling, so will he be proportionately useful to others.

I remember that a surgeon, whom I once accompanied to visit a patient at some distance from the town, put to me several questions as to my capability of distinguishing one disease from another. I was forcibly struck with the benefit that could not but accrue from such a method, however imperfect a test of actual knowledge at the bed side.

I am aware, that, since my noviciateship at the Dispensary, an examination has been instituted to ascertain the pupil's adequacy previously to his being allowed to prescribe for actual disease. It is gratifying also to understand, that clinical discourses are about to be given at one or both of those institutions, for the improvement of pupils in general medical knowledge. No better schools can possibly be formed; and, as I believe the College of Surgeons do not require certificates of attendance on medical lectures, the student may derive from the former all he can require, and, consequently, spare himself the expense of feeing a physician's class in the metropolis.

The surgeons of your Dispensaries are anxious to obtain the establishment of a few beds for the accommodation of those who, needing the performance of serious operations, happen to be poor and ill-lodged. Would it not be well, if possible, to form such an establishment? In acceding to it, you will benefit the poor and themselves. Let not your pupils be forgotten; stipulate for their instruction!

You may safely lay it down as an axiom, that the more numerous the facilities for obtaining effectual professional aid, the more will the public be benefited. Large institutions often become serious evils; the good they effect is ever attended with a proportionate share of alloy. The nearer the sick indigent poor can be approximated to the condition of the patient who can afford to remunerate, the more effectually will he be relieved. The author of the *Essay on Medical Economy* condemns even the establishment of dispensaries, and asserts, that, in the aggregate, they are injurious to the public and the profession.

"It is impossible," says he, "that the diseases of a crowd of patients can be examined as they ought; there is too much work to be done for the few who are employed to do it, and they leave the rest of the profession comparatively idle."

That the poor are often seriously inconvenienced is, I believe, beyond a doubt. What other cause can be assigned for their resorting daily to druggists' shops for advice, and their preferring to pay a few pence for the medicine he prescribes, rather than seek an interview with a regular practitioner?

Perhaps there exists a fundamental error in the structure of our charitable institutions. Might not many of the poor, who claim relief, afford to pay a moderate sum, or might they not contribute a small annual subscription thereto? The beneficence of charity, in administering indiscriminate gratuitous assistance to all, would appear to annihilate that feeling of independence which all cherish, and fain wish to seem to have, though steeped to the very lips in poverty.\*

What is the true method of teaching the medical art?

The most effectual mode of instructing youth must be at the bed side, (a certain degree of anatomical and physiological knowledge having been previously acquired,) not from books or lectures, but from the observation of actual disease. The

\* Individual or public charity should be regulated by the dictates of policy. It is an art that needs the aid of reflection. When we relieve the poor, we are not always doing good. Alms, badly disposed, engender but new importunities. Their first effect is the aggravation of mendicity.

instructor has only to lead them in the proper path ; to impart to them the most masterly style of interrogation ; to explain what they do not comprehend ; to inquire wherefore they form their conclusions. It is generally in vain that a lecturer sets before us the most interesting truths, though delivered in elegant language and aided by the graces of oratory. How few of the hearers can command a continued attention ! they preserve but a lively impression of detached portions of the discourse.

What they have sought for themselves under his direction, what they have attained by a series of mental calculations, will remain indelibly impressed on their recollection. By this method, the information they may acquire is not only more clear and more durable, but it has something also more original, more adapted to the peculiar capacity of the individual. The habit of deriving instruction from real objects soon indisposes the mind to every other source of its acquisition.

The Greeks never had an idea that the history of diseases, of their symptoms and indications of cure, could be taught from a chair apart from the objects. It is true that some of the principles of our art may be acquired from books and discourses. Though books are generally preferable to the latter, they are inferior, however, in some respects, for lectures are sometimes rendered deeply impressive by the animation and accent of the teacher. Besides, books cannot adapt themselves to the degree of intelligence or attention of the reader ; cannot present in different lights, in new forms, what does not appear to have been comprehended.\*

But objects of this kind are in small number ; in all others the teacher cannot be understood but in their presence. To

\* Were it possible to see every thing with our own eyes, it would, perhaps, be well to dispense with them, or, at least, to content ourselves with perusing the histories of diseases only. We should then study the features of nature herself, and avoid the intricacies of human deductions. The most correct paintings excite an imperfect idea of what they represent. Can the sublimity of Mont Blanc be transferred to canvas ? the nature of an odour be rendered intelligible to him who has never experienced it ? How, then, can a disease be understood by one who has never seen it ? Life, however, is too short, and the limits of art too extensive, to enable us to dispense with referring to the experience of others.

describe a part of the body, a disease, a surgical operation to him who has no knowledge of them, is as fruitless as describing the flavour of a fruit to one who had never tasted it.

The utility of adopting this method for instructing students in the knowledge of the principles and in the manual department of surgery is self-evident. The occasional attention of a teacher as to the mode in which they performed the minor operations, would prevent them contracting slovenly and injudicious habits. It is true that, by frequently acting as assistants to a dexterous operator, they may insensibly acquire a portion of his coolness and skill; but still, unless he shall detail to them his reasons for such a procedure; unless he superintend their actual performance on the dead body, these qualities will be imperfectly attained, the period of their acquisition be proportionably prolonged.

No greater advantage could be conferred than the rendering hospitals and dispensaries practical schools of instruction for every class of the profession. If the holding appointments, which generally pave the way to reputation and profit, be not really a sufficient remuneration for one of each department alternately assuming the professional gown, add a moderate stipend thereto.

As has observed to me a proven and valued friend, I have found, that "the subject of professional education has become more and more one of interest the more it is looked into." I wish the question to be regarded on every side. I look to those governors of public institutions who may be actuated with a desire of benefiting science, deliberately and cautiously to lay the foundation of those enactments which may contribute to "the more equal diffusion of professional knowledge, and, consequently, to the advantage of society in general."

If I have stated fairly the facts as to the by-laws of the Royal College of Surgeons, they will easily draw the conclusions as to their tendency; if the animadversions on the inefficacy of the ordinary system of education be correct, they will readily recognise the good results that must ensue from the adoption of practical instruction.



## APPENDIX.

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No. 1.

To MR. WM. GILL, *Liverpool.*

11, *New Burlington-street, London, May 12, 1824.*

SIR,—I beg leave to acknowledge the receipt of your letter, and lose no time in giving the earliest consideration to its contents and that of the tracts accompanying it, addressed to the Trustees of the Liverpool Infirmary. I have perused your remarks with deep interest, and the nature of your appeal is so obvious, that no apology for requesting information on so important a subject can be necessary. It appears to me, that your questions may be considered under the following bearings; but to consider them fully would far exceed the limits of a letter.

The duties of governors of hospitals, in procuring the best assistance, medical and surgical, for the afflicted poor who become patients.

The interests of medical men, separately and collectively.

The interest of the public, although they scarcely seem conscious of it, to afford sufficient opportunities of observation and instruction to the junior branches of the medical profession.

The means by which efficient medical and surgical education can be attained, without compromising the safety of the humbler classes of society, whose necessities preclude the obtaining of medical aid, unless through the medium of public institutions or private charity. Were the facts bearing upon each of these heads ascertained and collated, the induction would be obvious to common sense.

With regard to the officering of the public hospitals, the subject is one of great difficulty, as I fear the facts relative to the different modes are not sufficiently ascertained to determine what is really best; how much depends upon the system, and how much appertains to the individual conduct and attainments of those who have been fortunate enough to be placed in situations abounding in opportunities of alleviating the sufferings of others. Perhaps it may be found, whether the duties of medical officers to public charities be faithfully performed or otherwise, that this individuality makes a greater difference than the mode of election; for, I doubt not, your own observation may have furnished you with instances, perhaps even occurring in the same institution, in which the exalted conduct and well-earned success of one individual has merited esteem and approbation; whilst the conduct of another, elected under the same system, has been so diametrically opposite, as to excite commiseration for the frailties of human nature.

I fear, that an extensive observance of hospital practice will be too likely to furnish occasion for deep regret; but these occasions have been found to arise as well in institutions whose officers succeed each other in rotation, as in others in which the officers have been permanent. I believe the cause lies deeper than in the mere mode of appointing hospital surgeons and physicians; and so long as the ground-work of medical education remains essentially defective, so long must frequent and dangerous errors be the result.

Excellent as I believe the plan of affording to assistants and juniors, when permitted to operate, the guidance of those more experienced, yet I have known evils of such serious magnitude arise from premature fondness for performing operations, that never would I sanction the attempt of any one to operate on his fellow-creatures, until after he had acquired the necessary elementary knowledge, and, by frequent performance on the dead body, had demonstrated that he was prepared to guard against all the probable accidents, and to perform and explain every step of the operation, not merely decently, but completely and unexceptionably. I am of opinion, that in every surgical proceeding there is a *right* and a *wrong*, and each single part must come under the definition of the one or the other; and, though the subject be complicated, were the necessary mental labour properly directed and applied, I cannot conceive that there should be any greater uncertainty than in a mathematical demonstration.

I am, however, far from believing, that any superintendence of the most expert and experienced can guide the hand of a bungler, (that is to say, of one deficient in elementary foundation, as well mentally as mechanically,) although the latter may have paid his fee to a Court of

Examiners, and have received the diploma of the Royal College of Surgeons. I may mention one instance, out of many that have come to my knowledge. A house surgeon of a public hospital prevailed upon a patient, who applied for relief from stone of the bladder, to allow him to operate, and one of the senior surgeons condescended to act as assistant and director. The patient was smuggled into a private lodging, and the operation was performed: a small calculus was extracted, and the patient survived, after a tedious illness; but, although years have elapsed, the patient has ever since suffered, and still suffers, from a fistulous communication between the bladder and rectum, the latter having been wounded in the operation. Could such a result be expected in the hands of a Cheselden, a Trye, or any other fully competent to the duties of surgery?

In the Essay on Education, to which you have alluded, I have endeavoured to trace the defects of medical and surgical education, and to suggest, as far as my judgment has enabled me to do, the means of obviating them. The plan and extent of study I have ventured to recommend, I am conscious fall far short of what ought to be attained by every one intrusted with the care of the health and lives of his fellow-creatures; and yet by some it has been thought to be rather Utopian than adapted to the generality of those who embark in the medical profession.

Should you peruse the Essay on Education before-mentioned, you will find that the subject of hospital arrangement has not passed without notice. In certain hospitals the system of rotations obtains, in the manner pointed out in page 67.—See also page 132, &c. In other papers in the same volume which contains the above are some illustrations of this system.—See a paper on Fractures of the Patella, by Mr. Moggridge, and further, in the succeeding observations on Fractures of the Patella and Olecranon, in which my sentiments are expressed.

Were every surgeon as fully qualified for the duties of his profession as he ought to be, (a consummation rather to be desired than expected,) the system of rotation, by equalizing the advantages of which, professionally, each member should expect a due proportion, might be adopted with advantage to the profession and without injury to the patients confided to his care; but so long as some individuals are highly qualified to perform the duties of surgery, and others, possessing the same nominal qualification, are incompetent to the performance of these duties, it is devoutly to be wished, that the appointment to the situation of hospital surgeon should fall upon the most worthy only.

The system you propose of quinquennial rotation might stimulate the junior members of the profession to qualify themselves for so important a trust, and might form a valuable field for surgeons to acquire experience; but I fear the benefit to the patients would no be quite so

demonstrable. Were the duties of all hospitals performed as ably as you have shown those of the Hotel Dieu to be, under the chief surgeon of that establishment, M. Dupuytren, how much suffering might be averted, how many lives might annually be saved! His usefulness would be limited, indeed, did he confine his labours to the sick; but you have shown that he delivers clinical lectures on all the more important cases which are treated by him in the hospital. I blush to confess I do not know one specimen of collecting the results of experience in a British Hospital that will bear comparison with his *Essay on Fractures of the Lower Limbs*, published in the French *Annuaire Medico-Chirurgicale* for 1819.

The candour of your request must be my apology for having entered so much into detail; for, as I am always anxious to correct any opinion I may have formed on erroneous data, I deem it due to you to state the grounds on which my opinions were founded.

In conclusion, I beg leave to state my opinion, that, in the present state of medical and surgical education, and the consequent imperfect attainments of many, who have, nevertheless, complied with the common routine of time and fees, and have also performed the farce of a mere verbal examination for a college diploma, were the system of rotation adopted, many individuals who might be ambitious to distinguish themselves by attempting the higher departments of surgery without the necessary judgment to direct, or the skill to perform what they aspired to, would thereby become dangerous experimenters, who now, from want of opportunity, remain comparatively harmless. At the same time I am free to confess, that, when the choice of governors of hospitals unfortunately happens to fall on an individual either imperfectly qualified, or who, in point of fact, fails to perform faithfully the exalted duties which appertain to the situation of hospital surgeon or physician, the evils are sufficiently obvious. On the other hand, where a deserving medical officer honourably fulfils the duties of his station, every year's observation and experience increases, in a compound ratio, his value to society at large; and were regulations adopted to secure that no one should retain the advantages of such an appointment longer than he should preserve accurate records, and honestly publish the same annually, or oftener, for the information of the profession at large, comprising comprehensive statements of the cases, the practice adopted, and the results, the mere drones would be driven from the hive, and the able and intelligent only would remain, to diffuse improvement and to sustain the usefulness and dignity of the healing art.

I am, Sir, your obedient servant,

THOMAS ALCOCK.



## No. 2.

*To MR. THOS. ALCOCK, London.*

*Liverpool, January 24, 1825.*

SIR,—I beg you to accept my sincere thanks for your letter of the 12th of May, 1824. As we have the same ultimate object in view, that of adding to the aggregate of professional knowledge, I will venture to offer some observations on those parts of your letter, in which you have urged a doubt as to the results that might ensue from the adopting of a definite period for the continuance in office of hospital physicians and surgeons.

That the qualifications of the individual who may be chosen are of paramount importance is most true; but are not almost invariably the electors' votes procured by the aid of private influence or priority of application? The professional talents of the candidate are seldom taken into consideration.

In truth, were they ever so desirous of doing so, to what data can electors resort for forming an estimate thereof? Public opinion must be their surest guide; but have we not both seen instances where this claim even has been defeated by the efforts of influence?

I have imagined that one result of permanency has been the diminishing the zeal even of those who are fully capable to the performance of their duties. When they shall have obtained a large share of public esteem and an extended practice, can they spare the time we all know to be requisite for forming a correct judgment of disease and for the well managing of surgical cases? What is the fact in the London hospitals?

If there be of those "whose hospital practice will be too likely to furnish occasion for deep regret," does not permanency become a serious evil? Though their colleagues and the governors are aware of their neglect or incapacity, still who would be cruel enough to desire that one, who, in other respects, may be a worthy man, should retire?

I have supposed that periodical changes would incite a greater proportion of the profession to pursue their studies with redoubled attention. If the chances be multiplied for the obtaining of public appointments, will not such probably be the result?

But, in advocating the appointment of assistants, the adoption of practical discourses, and open hospitals, will not the means be afforded every man of common capacity and industry of rendering himself equivalent to the ordinary duties of his profession? Why, then, should the powerful engine of emulation be neglected?

Have sufficient trials been afforded of comparing the results of the permanent and its opposite mode? I have not, as yet, had the opportunity of perusing Mr. Highmore's work on the Public Charities of the Metropolis. I have referred, however, to the pages you point out in the *Essay on Education*, but the observations seem to me to have reference only to house surgeons.

I sincerely believe that the general adoption of your system of education would effect every thing that can be desired; for, if men in general were capable of thus exerting themselves for the welfare and instruction of a pupil, in performing the duties of an hospital, they would not neglect to make the best use of the materials they had in their hands: the good of their patients and the advancement of science would alike be the objects of their solicitude.

I am aware that a self-conviction that we ought to adopt a certain line of conduct, or, in other words, that conscience is the best of all possible guides; but is not this monitor frequently silenced by a variety of impulses? You leave every thing to the individual's sense of duty; I would bring to bear upon him as well the superintending eye of an Hospital Committee, his personal interest, and his love of fame.

At page 301 of your *Practical Observations on Fractures of the Patella and Olecranon* I have perused your remarks with attention. It is the obviation of this very circumstance of surgeons intrusting the management of hospital fractures to pupils who have not acquired either the dexterity to perform or to regulate the treatment that it would be desirable to effect. I esteem it as indispensable, that every student should be allowed to execute, when adequate instruction and observation shall have preceded. Without these trials, how can we estimate to what extent he understands what he has been taught, has comprehended what he beheld?

No man on earth can be more expert in the management of broken limbs than M. Dupuytren. You have given honourable testimony of his knowledge of the principles that should guide him. As with us, the pupils that happen to be near him at his visit see well, all hear the clinical lecture; but still, to complete the circle of instruction, should he not intrust the management of cases occasionally to those pupils whose adequacy he has previously ascertained?

The unfortunate result you have mentioned of the operation for lithotomy, performed by the house surgeon, is to be lamented. It shows clearly, that, in the initiation of young surgeons into the operative part of their art, the possibility of dangerous errors should ever be held in view. It is probable, however, that, if the gentleman who superintended had witnessed the house surgeon repeatedly operate on the dead body,

and been clearly satisfied that he understood the principles and was aware of the dangers of what he was about to undertake, that the event would not have occurred.

You are well aware, that this is one of those operations that requires for its masterly performance the most accurate anatomical knowledge, a long series of preparation and determinate coolness; in truth, a concentration of all the requisites that enter into the beau ideal of a surgeon. I have known the same sinister event occur at Paris, and that not from the hands of a Tyro, but a surgeon.

You approve of the principle; it is the abuse of it only that you deprecate.

In conclusion, I trust, that, if effectual means be taken to instruct beginners in the knowledge of the elementary principles of the art, either by the aid of private instruction, or by the adoption of practical discourses at the public institutions; that, if care, above all, be taken to ascertain that they comprehend what they have been told; and that, if they are initiated, step by step, from the less to the more difficult divisions of the operative part, we may then have the great bulk of surgeons as fully qualified for the duties of their profession as they ought to be, and that the system of rotation could be adopted without the slightest possibility of injury to the patient. I think, however, that the chance of this occurrence is obviated by the office of assistant, which would afford even him, who had but nominal qualifications, the opportunity, in the space of four or five years, of acquiring real ones, ere he succeeded to the office of the chief.

I am, &c. &c.,

W. GILL.

### No. 3.

Is it not advisable that the art of medicine, which has for its object the prevention and cure of disease, should be brought as near as possible to a state of perfection?

That there is yet much, very much to be discovered in the healing art, is an incontestable and humiliating fact: it has by no means kept pace in progress with the other branches of knowledge. Many causes have been assigned for this state of imperfection; but, perhaps, they may principally be referred to two—the complicated nature of the art itself, and the want of motives sufficiently powerful in the minds of its professors to call forth exertions proportioned to that complicity.

If we institute a parallel between the medical art and the exact sciences, we shall not be surprised to find it is so far behind. The laws that guide the movements of animated matter in general elude research. Vitality is

an unknown something not submissible to the cognisance of the senses. The very cause that produces disease in one man may not disturb the health of another, or may have been rendered inert by agents that escape our calculations. The laws of inanimate matter are regular, constant, uniform. They enable the chymist to class his scale of affinities with unerring certainty. An acid will ever select a certain alkali in preference to another; he can distinctly trace cause and effect. In the living body a variety of concomitant circumstances, many of them inappreciable, can modify the result of the same agent.\* It is beyond the power of man to alter the nature of the art, or to gift those who practice it with additional senses of observation. There are secrets of nature that will never be understood; the attempt to explain them has often entangled the strongest minds in the mazes of absurdity.

But is it not an object of importance to consider whether means cannot be devised to augment the acquirements of its professors as a body, and as well to employ them to more advantage than is done in the present state of our medical associations?

When you confer the appointment of hospital physician or surgeon upon an individual, you bestow an important boon; you enable him to advance in knowledge, to treasure up a series of practical deductions that tend to render him much more efficient; you enlarge the sphere of his observation tenfold; you open to him an avenue to honour and competence.

Remembering these facts, and as well the good that must accrue to society by enabling a greater proportion of medical men to possess the same advantages, does it not merit consideration whether a judicious modification shall or shall not be effected?

Will it be affirmed, that the general interests of the profession may be safely left to take their own course; that in nowise do they demand the attention of the public; that in modelling the enactments that are to regulate your institutions, with an eye to their advancement, you pass the legitimate confines of your jurisdiction? I answer, that in no civilized state has this been deemed advisable. In England, the royal charter has been granted to the physicians and surgeons. These bodies regulate the time and manner of education for those who mean to become candidates for their honours. In France, besides a preliminary classical education, three years must be passed at a school of medicine, ere the degree of doctorship can be demanded. Under the Austrian Government, this period is extended to five. The principal and accessory branches of education are as well defined.

\* This is well exemplified in the passage of the Andes. There is about midway a house where travellers meet. Those who have descended complain of the heat, while those who have come from the plains are shivering with cold. The same thing is shown by alternating the hands in liquids of different temperatures.



## No. 4.

“ A candid and faithful exposition and investigation of the excellences and defects of the various institutions relating to the science and profession of medicine is yet a desideratum ; it could not fail to be highly useful, as it would confirm whatever was really valuable, and prepare the way for the correction of those errors and abuses which are incompatible with an art, whose humble glory should be to do good.”

On the Continent, the revolution at the close of the last century produced a new organization of the schools of medicine. The most celebrated professors of the art were charged with the compilation of the regulations. Some of these men are now alive. Professor Chaussier, in a recent work on Medical Jurisprudence, in alluding to professional juridical reports, observes, “ It is impossible to succeed in an art without previous practice therein : thus, ere he commence practice, the youth ought not only to have assiduously attended the lessons of the instructor, to have perused and meditated on the different works that treat of medical jurisprudence, but he ought as well to have opened himself, under the superintendence of his teachers, different dead bodies, to have noted the changes he found therein, to have drawn up reports, and made inductions from what he beheld. He ought, afterwards, to have submitted them to the examination of his teachers and the remarks of his fellow students.” After pointing out the advantages to be derived from analyzing and commenting on the works of others, he concludes by saying, “ These methods of practical exercise are still a desideratum in our schools ; by adopting them our students would soon acquire manual dexterity, exactness of method, precision of description, a facility of discussion, and correctness of induction.”

The grand distinction between the French system and ours (may I not venture to say imperfect mode?) consists in the kind of instruction being adapted to the state of the pupil's preparedness, so that the same lessons are not given indiscriminately to all ; in a longer period being required for education, ere the principal degree can be demanded ; in instituting severe examinations to ascertain a pupil's equivalence for the office of internal pupil to an hospital ; in obliging him to keep records of the cases which are under his superintendence, and the daily instruction he receives from the chief.



## POSTSCRIPT.

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SINCE the preceding pages were printed off, I have perused the Plan of Medical Education that was drawn up by a Committee of the Royal Society of Medicine, at Paris, in the year 1790, and submitted to the Legislaturc. I subjoin a few extracts therefrom.

In speaking of the reform which the healing art required, they say, “that the medical profession is, perhaps, the only  
“one where the practitioner, formed by his own experience,  
“does not serve as a guide to the student; that to become  
“instructed by his own errors is the only resource for the ac-  
“quisition of knowledge which is left for the young practitioner.

“Hitherto medical instruction has consisted only in words,  
“which is the reason why so little advantage has been derived  
“from it; whereas, on the contrary, it ought to be founded  
“principally on facts.”

In the section on the mode of teaching medicine in country hospitals, they observe, “ It will be easy to admit into the hospitals students under the title of house-pupils, and to lodge and board them there. There will result from this a greater facility of instruction ; for, in practical sciences, a person cannot become a proficient, unless he be actually engaged in the practice of them. For this reason, the pupils admitted into the hospitals shall have a share in the management of the patients.

“ Another very important advantage consequent on teaching medicine in the country hospitals will be, the affording an opportunity for the cultivation of genius, which has never yet been held out.”

They affirm, that “ this mode of teaching would certainly be the most useful of any to the public.”

With respect to the physicians and surgeons of hospitals, they say, “ It may be asked, whether physicians and surgeons, when once appointed, shall hold their places for life, or for a certain term of years only ; or whether they may be re-elected after an interval of ten or twelve years ? This important question cannot be investigated on this occasion, and is therefore only suggested. The two last propositions seem to be preferable to the first. 1st, Because, by these means, no improper person who may have been appointed will be continued too long in office. 2dly, Because a practitioner will thus be prevented from keeping a place, to the duties of which his great age or infirmities may render him inadequate. 3dly, Because, in this manner, a spirit of emulation will be promoted, by affording a field for a great number of competitors, a circumstance which deserves much attention.”



With regard to the mode of giving clinical instruction, they observe: "If the professor should think proper to instruct his pupils by familiar means, he may appoint them successively and by turn, to collect the history and treatment of a certain number of patients, and may question them on their cases. He will thus teach them to observe and to judge, by the most unerring and instructive method."

Again, "It is thus hospitals will afford to pupils every opportunity of instruction in the practice, both of medicine and surgery, which the school of nature can furnish; and, therefore, it is to be presumed, that the young practitioners, even after having passed their examinations, will still continue to attend them, in order to improve themselves more and more in the practice of their profession."

FINIS.





